

SERIAL NUMBER 09/122,484	FILING DATE 07/24/98	CLASS 379	GROUP ART UNIT 2742 2743	ATTORNEY DOCKET NO. 8285/181
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APPLICANT
TERESA FARIAS LATTER, KILDEER, IL; NANCY ANN BOOK, NAPERVILLE, IL;
MARY LOUISE HARDZINSKI, PALATINE, IL; JAMES THOMAS MACIEJEWSKI,
SPRING GROVE, IL; THOMAS JOSEPH MCBLAIN, ARLINGTON HEIGHTS, IL;
JOHN WESLEY MOSS, LAKE ZURICH, IL.

CONTINUING DOMESTIC DATA***
VERIFIED

NONE BN

371 (NAT'L STAGE) DATA***
VERIFIED

NONE BN

FOREIGN APPLICATIONS***
VERIFIED

NONE BN

FOREIGN FILING LICENSE GRANTED 08/12/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 7	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 12
Verified and Acknowledged <u>BN</u> Examiner's Initials Initials					

ADDRESS
BRINKS HOFER GILSON & LIONE
P O BOX 10395
CHICAGO IL 60610

TITLE
METHOD AND SYSTEM FOR PROVIDING ENHANCED CALLER IDENTIFICATION

FILING FEE RECEIVED \$2,632	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4450

SERIAL NUMBER 09/122,484	FILING DATE 07/24/1998 RULE	CLASS	GROUP ART UNIT 2643	ATTORNEY DOCKET NO. 8285/181
APPLICANTS TERESA FARIAS LATTER, KILDEER, IL; NANCY ANN BOOK, NAPERVILLE, IL; MARY LOUISE HARDZINSKI, PALATINE, IL; JAMES THOMAS MACIEJEWSKI, SPRING GROVE, IL; THOMAS JOSEPH MCBLAIN, ARLINGTON HEIGHTS, IL; JOHN WESLEY MOSS, LAKE ZURICH, IL;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/12/1998				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY IL	SHEETS DRAWING 7	TOTAL CLAIMS 45
				INDEPENDENT CLAIMS 12
ADDRESS 757				
TITLE METHOD AND SYSTEM FOR PROVIDING ENHANCED CALLER IDENTIFICATION				
FILING FEE RECEIVED 5438	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	